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FAX TRANSMISSION

DATE: January 18, 2005

TO: Commissioner for Patents
Attn: Office of OIPE Filing Receipt Correction
P.O. Box 1450
Alexandria, VA 22313-1450

FROM: David M. Crompton

OUR REF: 1001.1690102
TELEPHONE: (612) 667-9050

Total pages, including cover letter: 3

PTO FAX NUMBER: 703-746-9195

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Title of Document(s) Transmitted: REQUEST FOR CORRECTED FILING RECEIPT
WITH COPY OF FILING RECEIPT ATTACHED

Applicant: Roger Farnholtz
Serial No.: 10/804,360
Filed: March 19, 2004
Group Art Unit: 3763
Our Ref. No.: 1001.169010
Confirmation No.: 9216
Customer No.: 28075

Please charge Deposit Account No. 50-0413 in the amount of \$, Fee Code .
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By: David M Crompton
Name: David M Crompton
Reg. No. 36,772

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

Kathleen L. Boekley
Name: Kathleen L. Boekley

January 18, 2005
Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Roger Farnholtz Confirmation No.: 9216
 Serial No.: 10/804,360 Examiner: Unknown
 Filing Date: March 19, 2004 Group Art Unit: 3763
 Docket No.: 1001.1690102 Customer No.: 28075
 For: TORQUEABLE AND DEFLECTABLE MEDICAL DEVICE SHAFT

Office of OIPE Filing Receipt Corrections
 Commissioner for Patents
 PO Box 1450
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REQUEST FOR CORRECTED FILING RECEIPT**CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8(1)(i)(B):**

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Kathleen L. Boekley *January 18, 2005*
 Kathleen L. Boekley Date

Sir:

Attached is a copy of the official Filing Receipt received with regard to the above application for which issuance of a corrected Filing Receipt is respectfully requested.

Applicant requests correction of Attorney/Agent Firm name to read as follows:

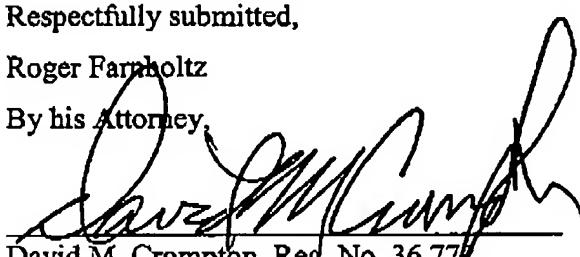
CROMPTON, SEAGER & TUFTE, LLC

The requested correction is not due to any error by Applicants and no fee is due. Applicants respectfully request correction of this error and issuance of a corrected Filing Receipt in due course.

Respectfully submitted,

Roger Farnholtz

By his Attorney,



David M. Crompton, Reg. No. 36,772
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Date: 1/18/05



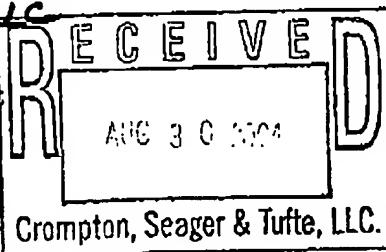
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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/804,360	03/19/2004	3763	910	1001.1690102	2	23	4

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CONFIRMATION NO. 9216

CORRECTED FILING RECEIPT



OC000000013636347

Date Mailed: 08/25/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Roger Farnholtz, Fremont, CA;

Assignment For Published Patent Application

SciMed Life Systems, Inc.;

Domestic Priority data as claimed by applicant

This application is a CON of 09/863,152 05/22/2001 PAT 6,716,207

Foreign Applications

If Required, Foreign Filing License Granted: 05/30/2004

Projected Publication Date: 09/09/2004

Non-Publication Request: No

Early Publication Request: No

Title

Torqueable and deflectable medical device shaft